

<b>Tier Two EMERGENCY AND HAZARDOUS CHEMICAL INVENTORY</b>  <i>Specific Information by Chemical</i>	<b>Facility Identification</b>				<b>Owner/Operator</b>										
	Name <u>Willy's Widgets</u>		MI SARA ID <u>1002</u>		Name <u>Widget World</u>		Phone <u>312-555-1212</u>								
	Street <u>333 S Capitol</u>				Street <u>77 W Jackson Blvd</u>										
	City <u>AnyTown</u> County <u>Ingham</u> Zip <u>48909-1234</u>				City <u>Tinseltown</u> State <u>IL</u> Zip <u>60604</u>										
	LEPC <u>Ingham Co LEPC</u> Fire Department <u>Delhi Twp FD</u>				Country _____										
	SIC Code <u>3795</u> Facility Phone <u>517-555-0000</u>				<b>Emergency Contact</b> (1 contact required)										
	<b>Mailing Address</b>				Name <u>Billy Willy</u> Title <u>Plant Supervisor</u>										
	Name 1 <u>Willy's Widgets</u>				Phone <u>517-555-1234 x14</u> 24Hr.Phone <u>989-555-2468</u>										
Name 2 <u>Attn: Environmental Manager</u>				Name <u>Joe Gofer</u> Title <u>Environmental Manager</u>											
Street 1 <u>333 S Capitol</u>				Phone <u>517-555-1234 x 23</u> 24Hr.Phone <u>517-555-6789</u>											
Street 2 <u>PO Box 1234</u>				Name _____ Title _____											
City <u>AnyTown</u> State <u>MI</u> Zip <u>48909-1234</u> Country _____				Phone _____ 24Hr.Phone _____											
<i>Important: Read all instructions before completing form</i> <b>Reporting period from January 1 to December 31, 2006</b>															
<b>Chemical Description</b>		<b>Physical and Health Hazards</b> (check all that apply)		<b>Inventory</b>		<b>Container Type</b>		<b>Pressure</b>		<b>Temp</b>		<b>Storage Codes and Locations</b> (Non-Confidential) <i>Chemical Locations</i>			
CAS <u>N/A</u> Trade Secret [ <input type="checkbox"/> ]		[ <input type="checkbox"/> ] Fire		1,200		Max Daily Amount in pounds		<u>R</u>		<u>1</u>		<u>4</u>		Forklift batteries in warehouse & mfg bldg	
Chem. Name <u>BATTERY ACID</u>		[ <input type="checkbox"/> ] Sudden Release of Pressure		0 3		Max Amount Code									
Check all that apply [ <input type="checkbox"/> ] [ <input checked="" type="checkbox"/> ]* [ <input type="checkbox"/> ] [ <input checked="" type="checkbox"/> ] [ <input type="checkbox"/> ] [ <input checked="" type="checkbox"/> ] Pure Mix Solid Liquid Gas EHS		[ <input checked="" type="checkbox"/> ] Reactivity		1,200		Avg. Daily Amount in pounds									
EHS Name <u>SULFURIC ACID</u>		[ <input checked="" type="checkbox"/> ] Immediate (Acute)		0 3		Ave Amount Code									
		[ <input checked="" type="checkbox"/> ] Delayed (Chronic)		3 6 5		Days On site									
*Significant Mixture Components															
CAS: <u>7664-9309</u>		Chem. Name: <u>SULFURIC ACID</u>				<u>33</u> %		EHS [ <input checked="" type="checkbox"/> ]							
CAS:		Chem. Name:				_____ %		EHS [ <input type="checkbox"/> ]							
CAS:		Chem. Name:				_____ %		EHS [ <input type="checkbox"/> ]							
<b>Certification</b> (Read and sign after completing all sections)												<b>Optional Attachments</b>			
I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages [1] through [ <u>4</u> ], and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.												<input type="checkbox"/> Site plan  <input type="checkbox"/> List of site coordinate abbreviations  <input type="checkbox"/> Description of dikes and other safeguard measures			
Owner/Operator OR owner/operator's authorized representative:															
<u>Joe Gofer</u> Print Name		<u>Environmental Manager</u> Print Title				_____ Signature		<u>10 Jan 2007</u> Date signed							

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	Street <u>333 S Capitol</u>				Street <u>77 W Jackson Blvd</u>					
	City <u>AnyTown</u> County <u>Ingham</u> Zip <u>48909-1234</u>				City <u>Tinseltown</u> State <u>IL</u> Zip <u>60604</u>					
	LEPC <u>Ingham Co LEPC</u> Fire Department <u>Delhi Twp FD</u>				Country _____					
	SIC Code <u>3795</u> Facility Phone <u>517-555-0000</u>				<b>Emergency Contact</b> (1 contact required)					
	<b>Mailing Address</b>				Name <u>Billy Willy</u> Title <u>Plant Supervisor</u>					
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City <u>AnyTown</u> State <u>MI</u> Zip <u>48909-1234</u> Country _____				Phone _____ 24Hr.Phone _____						
<i>Important: Read all instructions before completing form</i>   <b>Reporting period from January 1 to December 31, 2006</b>										
<b>Chemical Description</b>		<b>Physical and Health Hazards</b> (check all that apply)		<b>Inventory</b>		<b>Container Type</b>	<b>Pressure</b>	<b>Temp</b>	<b>Storage Codes and Locations</b> (Non-Confidential) <i>Chemical Locations</i>	
CAS <u>7664-93-9</u> Trade Secret [ <input type="checkbox"/> ]  Chem. Name <u>SULFURIC ACID</u>  <div style="text-align: center;"> Check all that apply  <input checked="" type="checkbox"/> Pure   <input type="checkbox"/> Mix   <input type="checkbox"/> Solid   <input checked="" type="checkbox"/> Liquid   <input type="checkbox"/> Gas   <input type="checkbox"/> EHS </div> EHS Name <u>SULFURIC ACID</u>		<input checked="" type="checkbox"/> Fire <input type="checkbox"/> Sudden Release of Pressure <input checked="" type="checkbox"/> Reactivity <input checked="" type="checkbox"/> Immediate (Acute) <input type="checkbox"/> Delayed (Chronic)		<div style="border: 1px solid black; padding: 2px;"> <u>844</u>   Max Daily Amount in pounds </div>					CONFIDENTIAL	
				<div style="border: 1px solid black; padding: 2px;"> <input type="text" value="0"/> <input type="text" value="2"/>   Max Amount Code </div>						
				<div style="border: 1px solid black; padding: 2px;"> <u>400</u>   Avg. Daily Amount in pounds </div>						
				<div style="border: 1px solid black; padding: 2px;"> <input type="text" value="0"/> <input type="text" value="2"/>   Ave Amount Code </div>						
				<div style="border: 1px solid black; padding: 2px;"> <input type="text" value="3"/> <input type="text" value="6"/> <input type="text" value="5"/>   Days On site </div>						
<b>*Significant Mixture Components</b>										
CAS:		Chem. Name:		_____ %		EHS [ <input type="checkbox"/> ]				
CAS:		Chem. Name:		_____ %		EHS [ <input type="checkbox"/> ]				
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<b>Certification</b> <i>(Read and sign after completing all sections)</i>  I certify under penalty of law that I have personally examined and am familiar with the information submitted in pages [1] through [ <u>4</u> ], and that based on my inquiry of those individuals responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.  Owner/Operator OR owner/operator's authorized representative:  <div style="display: flex; justify-content: space-between;"> <div> <u>Joe Gofer</u>  Print Name </div> <div> <u>Environmental Manager</u>  Print Title </div> <div> _____  Signature </div> <div> <u>10 Jan 2007</u>  Date signed </div> </div>								<b>Optional Attachments</b> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> Site plan </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;"> <input type="checkbox"/> List of site coordinate abbreviations </div> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> Description of dikes and other safeguard measures </div>		

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	City <u>AnyTown</u> County <u>Ingham</u> Zip <u>48909-1234</u>				City <u>Tinseltown</u> State <u>IL</u> Zip <u>60604</u>						
	LEPC <u>Ingham Co LEPC</u> Fire Department <u>Delhi Twp FD</u>				Country _____						
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<i>Important: Read all instructions before completing form</i>								<b>Reporting period from January 1 to December 31, 2006</b>			
<b>Chemical Description</b>			<b>Physical and Health Hazards</b> (check all that apply)		<b>Inventory</b>		<b>Container Type</b>	<b>Pressure</b>	<b>Temp</b>	<b>Storage Codes and Locations</b> (Non-Confidential) <i>Chemical Locations</i>	
CAS <u>N/A</u> Trade Secret [ <input type="checkbox"/> ]			[ <input checked="" type="checkbox"/> ] Fire		18,000 Max Daily Amount in pounds		<b>C</b>	<b>1</b>	<b>4</b>	SW corner of mfg bldg. (New process added 6-05)	
Chem. Name <u>ENAMEL PAINT</u>			[ <input type="checkbox"/> ] Sudden Release of Pressure		0 4 Max Amount Code						
Check all that apply <input type="checkbox"/> Pure <input checked="" type="checkbox"/> Mix <input type="checkbox"/> Solid <input checked="" type="checkbox"/> Liquid <input type="checkbox"/> Gas <input type="checkbox"/> EHS			[ <input type="checkbox"/> ] Reactivity		12,000 Avg. Daily Amount in pounds						
EHS Name _____			[ <input checked="" type="checkbox"/> ] Immediate (Acute)		0 4 Ave Amount Code						
			[ <input type="checkbox"/> ] Delayed (Chronic)		1 6 0 Days On site						
<b>*Significant Mixture Components</b>											
CAS: <u>64742-88-7</u>		Chem. Name: <u>MINERAL SPIRITS</u>				<u>19</u> % EHS [ <input type="checkbox"/> ]					
CAS: <u>471-34-1</u>		Chem. Name: <u>CALCIUM CARBONATE</u>				<u>25</u> % EHS [ <input type="checkbox"/> ]					
CAS: _____		Chem. Name: _____				_____ % EHS [ <input type="checkbox"/> ]					
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	City	<u>AnyTown</u>	County	<u>Ingham</u>
	LEPC	<u>Ingham Co LEPC</u>	Fire Department	<u>Delhi Twp FD</u>
	SIC Code	<u>3795</u>	Facility Phone	<u>517-555-0000</u>
	Name	<u>Widget World</u>	Phone	<u>312-555-1212</u>
	Street	<u>77 W Jackson Blvd</u>		
	City	<u>Tinseltown</u>	State	<u>IL</u>
	Country	<u>60604</u>		

*Important: Read all instructions before completing form* | **Reporting period from January 1 to December 31, 2006**

Confidential Location Information Sheet		Container Type	Pressure	Temp	Storage Codes and Locations (Confidential) Chemical Locations
CAS Number	Chemical Name				
7664-93-9	SULFURIC ACID	E	1	4	55 GAL DRUM – STORE RM, W SIDE IN WAREHOUSE

**Certification** (Read and sign after completing all sections)

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Owner/Operator OR owner/operator's authorized representative:

Joe Gofer                      Environmental Manager                      10 Jan 2006  
 Print Name                      Print Title                      Signature                      Date signed

**Optional Attachments**

- |                                     |   |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Site plan   |
| <input type="checkbox"/>            | List of site coordinate abbreviations             |
| <input type="checkbox"/>            | Description of dikes and other safeguard measures |